

P12000/00757

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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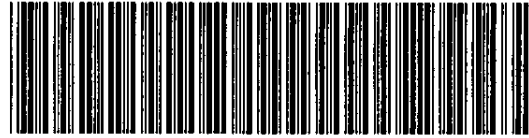
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 DEC 10 AM 11:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
12/11/12

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Lubee's Well Drilling & Pump Service, Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Timothy Lee Lubee
Name (Printed or typed)

15141 Garson Loop
Address

Spring Hill Florida 34610
City, State & Zip

813-971-2892
Daytime Telephone number

Lubees Well @ Yahoo. com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Lubee's Well Drilling & Pump Service INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

15141 Garson Loop
Spring Hill 1
Florida 34610

Mailing address, if different is:

P.O. Box 70
Land O Lakes
Florida 34639

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Water Well Drilling & Pump Service

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Timothy L. Lubee President Name and Title: _____

Address: 15141 Garson Loop Address: _____

Spring Hill
Florida 34610

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Timothy L. Lubee

Address: 15141 Garson Loop
Spring Hill FL 34610

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Timothy L. Lubee

Address: 15141 Garson Loop
Spring Hill FL 34610

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

7.7.2 Timothy L. Lubee
Required Signature/Registered Agent

12-5-12
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

7.7.2
Required Signature/Incorporator

12-5-12
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA